

January 16, 2024

Ms. Heather Forshey, Director
San Mateo County Environmental Health
2000 Alameda de las Pulgas, Suite 100
San Mateo, California 94403-1270

Dear Ms. Forshey:

During February 2023, through November 2023, CalEPA and the Unified Program state agencies conducted a performance evaluation of the San Mateo County Environmental Health Division Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, California Environmental Reporting System information, and oversight inspections.

Upon completion of the evaluation, a preliminary Summary of Findings report was developed to identify various findings: program deficiencies with corrective actions, incidental findings with resolutions and program observations and recommendations. The report also includes acknowledgement of accomplishments and challenges, as well as examples of outstanding Unified Program implementation. Enclosed, please find the final Summary of Findings report.

Based upon review and completion of the performance evaluation, CalEPA has rated the CUPA's overall implementation of the Unified Program as satisfactory with improvement needed.

To demonstrate progress towards the correction of program deficiencies and resolution of incidental findings identified in the final Summary of Findings report, the CUPA must submit an Evaluation Progress Report approximately 60 days from the date of this letter. Thereafter, the CUPA will submit each subsequent Evaluation Progress Report to CalEPA in accordance with the specified date provided in the Evaluation Progress Report response, until all deficiencies and incidental findings identified have been acknowledged as corrected or resolved by each issuing state agency. An Evaluation Progress Report template will be provided by the CalEPA Team Lead. Each Evaluation Progress Report must be submitted to the CalEPA Team Lead, Kaeleigh Pontif, via email at Kaeleigh.Pontif@calepa.ca.gov, or uploaded to the established SharePoint website.

Thank you for your continued commitment to the protection of public health and the environment through the implementation of the Unified Program.

Ms. Heather Forshey
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To ensure the CUPA Performance Evaluation process is as effective and efficient as intended, I kindly request the included evaluation survey to be completed and returned to Melinda Blum, at Melinda.blum@calepa.ca.gov. If you would like to have specific comments remain anonymous, please indicate so on the survey.

If you have any questions or need further assistance, please contact Melinda Blum at Melinda.Blum@calepa.ca.gov.

Sincerely,

A handwritten signature in blue ink that reads "Jason Boetzer". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Jason Boetzer
Deputy Secretary
Local Program Coordination and Emergency Response

Enclosure

cc sent via email:

Ms. Marjorie Terrell
HazMat Program Supervisor
San Mateo County Environmental Health
2000 Alameda de las Pulgas, Suite 100
San Mateo, California 94403-1270

Ms. Erin Thomas
San Mateo County Environmental Health
2000 Alameda de las Pulgas, Suite 100
San Mateo, California 94403-1270

Mr. Charles Ice
San Mateo County Environmental Health
2000 Alameda de las Pulgas, Suite 100
San Mateo, California 94403-1270

Ms. Cheryl Prowell
Supervising Water Resource Control Engineer
State Water Resources Control Board

Mr. Tom Henderson
UST Lad Prevention Unit and
Office of Tank Tester Licensing Manager
State Water Resources Control Board

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cc sent via email:

Ms. Julie Pettijohn
Environmental Program Manager
CUPA Enforcement Branch
Department of Toxic Substances Control

Ryan Miya, Ph.D.
Senior Environmental Scientist, Supervisor
Department of Toxic Substances Control

Ms. Jennifer Lorenzo
Senior Environmental Scientist, Supervisor
CAL FIRE - Office of the State Fire Marshal

Ms. Kaitlin Cottrell
Environmental Scientist
State Water Resources Control Board

Ms. Mia Goings
Environmental Scientist
Department of Toxic Substances Control

Ms. Denise Villanueva
Environmental Scientist
CAL FIRE - Office of the State Fire Marshal

Mr. John Paine
Unified Program Manager
California Environmental Protection Agency

Mr. John Elkins
Environmental Program Manager
California Environmental Protection Agency

Ms. Melinda Blum
Senior Environmental Scientist, Supervisor
California Environmental Protection Agency

Ms. Elizabeth Brega
Senior Environmental Scientist, Supervisor
California Environmental Protection Agency

Mr. Garrett Chan
Environmental Scientist
California Environmental Protection Agency

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cc sent via email:

Ms. Kaeleigh Pontif
Environmental Scientist
California Environmental Protection Agency

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CUPA: San Mateo County Environmental Health Division

Evaluation Period: February 2023 through November 2023

Evaluation Team Members:

- **CalEPA Team Lead:** Kaeleigh Pontif
- **CalEPA:** Garrett Chan
- **DTSC:** Matthew McCarron, Mia Goings
- **State Water Board:** Kaitlin Cottrell
- **CAL FIRE-OSFM:** Denise Villanueva

This Final Summary of Findings includes:

- Accomplishments, Examples of Outstanding Implementation, and Challenges
- Deficiencies requiring correction
- Incidental findings requiring resolution
- Observations and recommendations

The findings contained within this evaluation report are considered final. Based upon review and completion of the evaluation, the Unified Program implementation and performance of the CUPA is considered: satisfactory with improvement needed.

Questions or comments regarding this evaluation should be directed to the CalEPA Team Lead:
Kaeleigh Pontif
CalEPA Unified Program
Phone: (916) 803-0623
E-mail: Kaeleigh.pontif@calepa.ca.gov

The CUPA is required to submit the first Evaluation Progress Report 60 days from receipt of the Final Summary of Findings Report. Thereafter, the CUPA will submit each subsequent Evaluation Progress Report to CalEPA in accordance with the specified date provided in the Evaluation Progress Report response. For each identified deficiency and incidental finding, the CUPA must complete the corrective action and resolution as indicated to demonstrate sufficient implementation of the Unified Program as required by regulation or statute. The Evaluation Progress Report process will continue until all deficiencies and incidental findings have been acknowledged as corrected or resolved by each issuing Unified Program state agency.

Each Evaluation Progress Report must be submitted to the CalEPA Team Lead via email at Kaeleigh.pontif@calepa.ca.gov, or uploaded to the established SharePoint website. A narrative stating the status of correcting each deficiency and resolving each incidental finding identified in this Final Summary of Findings Report, and any applicable supporting documentation must be included in each Evaluation Progress Report.

The submittal date for the 1st Evaluation Progress Report is **April 12, 2024**.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

**UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT**

ACCOMPLISHMENTS, EXAMPLES OF OUTSTANDING IMPLEMENTATION, AND CHALLENGES

Various accomplishments, outstanding efforts, and challenges that impact and/or enhance the overall ability of the CUPA to implement the Unified Program. Recognition of aspects such as response to local emergency declarations and statewide recovery efforts, which illustrate the accomplishments and challenges the CUPA manages in the efforts to continue implementation of the Unified Program.

1. CUPA PARTICIPATION:

The CUPA continually demonstrates commitment to improving implementation of the Unified Program in assisting other CUPAs with implementation efforts as well as having personnel actively participate in the various workgroups and committees of the Unified Program Administration and Advisory Group, such as the Underground Storage Tank (UST) Technical Advisory Group, CUPA Forum Board, and Evaluation Steering Committee.

2. ABOVEGROUND PETROLEUM STORAGE ACT (APSA) PROGRAM IMPLEMENTATION:

Since the 2018 CUPA Performance Evaluation, the CUPA has met the mandated triennial inspection frequency for APSA tank facilities with 10,000 gallons or more of petroleum at least once every three years. The CUPA has also met the triennial inspection frequency for all other APSA tank facilities in accordance with the Inspection and Enforcement (I&E) Plan.

The CUPA ensured APSA tank facilities annually submitted a tank facility statement or a Hazardous Materials Business Plan (HMBP) in lieu of a tank facility statement to the California Environmental Reporting System (CERS).

The CUPA successfully enforced requirements of the APSA Program and obtained a high rate of return to compliance (RTC) for tank facilities that were cited with violations.

These inspection, enforcement and compliance efforts are above and beyond the standard implementation expectations of the APSA Program during the statewide restrictions and challenges resulting from the coronavirus (COVID-19).

3. DISASTER RECOVERY:

During Fiscal Year (FY) 2018/2019, the CUPA deployed six inspectors and one program supervisor between December 2018 and January 2019, to assist with the Butte County Fire Recovery efforts, totaling over 800 hours.

In August of 2020, the Cal Fire San Mateo-Santa Cruz Unit (CZU) Lightning Complex wildfire burned 86,509 acres in San Mateo and Santa Cruz Counties. In response, several CUPA staff were assigned to assist with cleanup efforts after the fire. CUPA and other County staff, including a CUPA supervisor, were assigned to the San Mateo County Wildfire Emergency Operations Center for several weeks. In addition, for several weeks following the fire, three CUPA staff were deployed to assist Santa Cruz County with hazard assessments of impacted properties.

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4. COVID-19 IMPACTS:

As a result of the COVID-19 pandemic, a shelter-in-place order became effective throughout San Mateo County on March 16, 2020, and was not fully rescinded until June 15, 2021. During this time, 9 of 13 (69%) CUPA staff were redirected to work on COVID-19 emergency activities within the County, as follows:

- 6 staff performed respirator fit testing part-time;
- 2 staff assisted COVID-19 testing facilities part-time;
- 1 staff performed contact tracing duties full-time;
- 1 staff participated on the COVID Compliance Task Force part-time;
- 1 program supervisor reported to the County Emergency Operations Center periodically.

Throughout the pandemic, CUPA staff continued to process CERS submittals and perform data quality checks.

5. HAZARDOUS WASTE GENERATOR (HWG) INSPECTION REPORTS AND RTC:

The CUPA has demonstrated commendable efforts to ensure that HWG facilities cited with violations obtain RTC. Follow-up activity and enforcement actions are very well documented, and clearly show the progress made by facilities to obtain RTC, as well as the willingness and availability of the CUPA to provide assistance. The CUPA's communication with facility representatives is courteous, professional, and offers guidance for compliance that is easy to understand.

The CUPA's inspection reports contain highly descriptive observations and factual basis for cited violations. This attentive detail is also reported to CERS, where violation comments entered have detailed observations and corrective actions. The observations written by inspectors in inspection reports provide the reasoning behind when, where, and how a violation occurred and are written in a way that is concise and understandable.

These actions demonstrate inspectors are well trained in writing inspection reports and drafting HWG program violations, which is considered a unique accomplishment of the CUPA regarding implementation of the HWG program.

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DEFICIENCIES REQUIRING CORRECTION

A program deficiency is considered a major deviation in implementation of the Unified Program from the expected standards set forth in statute or regulation. Commonly identified as a systemic problem in implementation of one or more program elements, a deficiency is likely to have an impact on the safety and protection of human health and the environment. Program deficiencies identify specific aspects regarding implementation of the Unified

1. DEFICIENCY:

The CUPA is not conducting complete annual UST compliance inspections.

The CUPA is not correctly citing nor documenting noncompliance and is not citing UST violations identified during annual UST compliance inspections in inspection reports and is not correctly reporting UST violations in CERS when UST violations are cited, including technical compliance rate (TCR) criteria.

Review of annual UST compliance inspection reports, associated testing and leak detection documents, and inspection, violation, and enforcement information, also known as compliance, monitoring and enforcement (CME) information reported in CERS finds:

- UST construction and testing discrepancies for the following single-walled USTs:
 - CERS ID 10065463
 - Monitoring System Certification Forms dated January 19, 2021, state In-Tank Gauging as only being used for inventory control, while the tank construction reported in CERS requires monthly 0.2 GPH ATG testing.
 - No violation was issued in CERS for Unified Program violation number 2030002 - Leak Detection Equipment Maintenance (USEPATCR 9d).
- Non-compliance was not observed, and a violation was not issued in CERS for the following:
 - CERS ID 10065463
 - UST Inspection Report dated January 18, 2023, cites "Diesel spill bucket lost ½" in the initial one-hour test period. The technician found the drain valve to be leaking. After minor repairs, the bucket was tested, passed."
 - No violation was issued in CERS for Unified Program violation number 2060020 – Spill Container (USEPATCR 9a).
 - CERS ID 10729288
 - UST Inspection Report dated May 19, 2021, cites "Three floats and chains required adjustment to function properly."
 - No violation was issued in CERS for Unified Program violation number 2030043 - Monitoring Equipment (USEPATCR 9d).
 - Overfill Prevention Equipment Inspection Report dated May 20, 2021, cites Tanks 1-4 failing.
 - No violation was issued in CERS for Unified Program violation number 2030036 – Overfill Prevention (USEPATCR 9b).

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- CERS ID 10341253
 - UST Inspection Report dated April 27, 2021, cites “L2: Fill 87-1 Did not trigger on first test. Second time it passed.”
 - No violation was issued in CERS for Unified Program violation number 2030043 - Release Detection (USEPATCR 9d).
- CERS ID 10166167
 - Overfill Prevention Equipment Inspection Report dated September 8, 2020, cites Tanks T1 and T3 failing.
 - No violation was issued in CERS for Unified Program violation number 2030036 – Overfill Prevention (USEPATCR 9b).
- CERS ID 10065799
 - UST Inspection Report dated August 18, 2022, cites “The LLD for 91 initially failed the test, however, after one quarter turn on the LLD, the test passed.”
 - No violation was issued in CERS for Unified Program violation number 2030025 - Line Leak Detector (LLD)-Double-Walled Pressurized Pipe (USEPATCR 9d).

CITATION:

California Code of Regulations (CCR), Title 23, Section 2713(c)(4) and (d)
CCR, Title 27, Section 15290(a)(3)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review and revise the I&E Plan, or other applicable procedure, to ensure the establishment of a process for UST inspection staff to conduct complete annual UST compliance inspections and document violations observed in annual compliance inspection reports and in CERS. The revised I&E Plan, or other applicable procedure, will at minimum include a process for:

- the review and follow-up of submitted UST testing and leak detection documents by the UST owner or operator as part of the annual UST compliance inspection;
- conducting complete annual UST compliance inspections at all UST facilities, including single-walled UST facilities;
- conducting annual UST compliance inspections when UST inspection staff are on-site to witness the monitoring system certification and visually inspect all UST required components;
- conducting annual UST compliance inspections when UST inspection staff are not on-site to witness the monitoring system certification and visually inspect all UST required components;
- ensuring violations observed during annual UST compliance inspections are correctly and consistently cited on the inspection report;
- reporting all inspections and observed noncompliance, including TCR criteria, documented in annual UST compliance inspection reports to CERS;
- reviewing the annual UST compliance inspection checklist for thoroughness to capture citations in accordance with UST Regulations, HSC, and the Unified Program violation library to CERS; and
- accurate U.S. Environmental Protection Agency (U.S. EPA) TCR reporting

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The CUPA will provide CalEPA with the revised I&E Plan, or other applicable procedure. The CUPA will contact the State Water Board for any assistance needed.

By the 2nd Progress Report, if amendments to the revised I&E Plan, or other applicable procedure are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended I&E Plan or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised I&E Plan or other applicable procedure. The CUPA may contact the State Water Board to assist in providing training. The CUPA will provide training documentation to CalEPA, which at minimum will include the date training was conducted, an outline of the training conducted, and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised I&E Plan or other applicable procedure.

By the 3rd Progress Report, if amendments to the revised I&E Plan or other revised applicable procedure were necessary, the CUPA will train UST inspection staff on the amended I&E Plan, or other applicable procedure. The CUPA may contact the State Water Board to assist in providing training. The CUPA will provide training documentation to CalEPA, which at minimum will include the date training was conducted, an outline of the training conducted, and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended I&E Plan or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with facility records for five UST facilities, as requested by the State Water Board, including, at minimum: annual UST compliance inspection reports and associated testing and leak detection documents.

2. DEFICIENCY:

The UST Program permit conditions on the "Permit to Operate," issued as the Unified Program Facility Permit (UPFP) are inconsistent with HSC and CCR, Chapter 16.

Review of the UST operating permit, issued under the UPFP, finds the following components required under CCR, Chapter 16 are missing:

- CERS Tank ID
- UST monitoring requirements

Review of the UST Program permit conditions finds the following inconsistencies with UST Regulations and HSC:

- Permit condition i states "The permittee must obtain approval from this division, local Fire, and Building authorities prior to modifying any UST system."
 - A requirement to contact the Fire and Building authorities is outside the scope of the "Permit to Operate" issued as the UPFP, which includes the UST operating permit. A UPFP cannot incorporate provisions of the California Fire Code or the California Building Code.
- A general permit condition states "This permit must be kept on-site and available for inspection upon request."
 - This is more stringent than CCR, Chapter 16, Section 2712(i), which requires a paper or electronic copy of the permit to be readily accessible at the facility.

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- A general permit condition states the permit is “not transferable and may be revoked for noncompliance with requirements.”
 - This is more stringent than CCR, Chapter 16, section 2712 (d) and HSC, Section 25284(b) which allows for the transfer of permits.
- A general permit condition states “This permit is valid unless expired, revoked, or suspended ...”
 - The CUPA does not have the authority to suspend a UST operating permit.

CITATION:

HSC, Chapter 6.7, Sections 25283(b)(1)(B), 25284(b), 25285.1 and 25297.01(b)
HSC, Chapter 6.11, Section 25404(a)(6)
CCR, Chapter 16, Sections 2711(c) and (i), and 2712(c), (d), and (i)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will revise the UST permit conditions template of the “Permit to Operate,” issued as the UFPF, to be consistent with UST Regulations and HSC. The CUPA will contact the State Water Board for assistance with revising the UST permit conditions, if necessary. The CUPA will provide the revised UST permit conditions template of the “Permit to Operate” to CalEPA.

By the 2nd Progress Report, the CUPA will, if necessary, amend the revised UST permit conditions template, of the “Permit to Operate,” based on feedback from the State Water Board. The CUPA will contact the State Water Board for assistance with revising the UST permit conditions, if necessary. The CUPA will provide the amended UST permit conditions template to CalEPA. If no amendments are necessary, the CUPA will begin to issue the revised UST permit conditions template with the “Permit to Operate.” The CUPA will provide CalEPA with the “Permit to Operate” issued to five UST facilities using the revised UST permit conditions template.

By the 3rd Progress Report, if amendments to the revised UST permit conditions template were necessary, the CUPA will begin to issue the amended UST permit conditions template with the “Permit to Operate.” The CUPA will provide CalEPA with the “Permit to Operate” issued to five UST facilities using the amended UST permit conditions template.

3. DEFICIENCY:

The CUPA is not properly classifying HWG Program violations.

Review of facility files and CERS CME information between January 1, 2020, and December 31, 2022, finds the following non-minor violations were classified as minor violations, in the following instances:

- Violation for exceedance of authorized accumulation time (CCR, Title 22, Section 66262.34) incorrectly cited as a minor violation. Maximum accumulation time may not be exceeded without a hazardous waste storage permit or grant of authorization from DTSC. An economic benefit is gained by not disposing of waste within the authorized time. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3).

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- CERS indicates 340 of 390 (87%) violations cited between January 1, 2020, through December 31, 2022, for exceedance of accumulation timeframe were classified as minor. Examples include, but are not limited to:
 - CERS ID 10069285: inspection dated December 5, 2021
 - CERS ID 10507609: inspection dated March 1, 2022
 - CERS ID 10064734: inspection dated November 29, 2022
- Violation for failure to provide or conduct training for employees incorrectly cited as a minor violation. Since no training was provided, employees are not familiar with hazardous waste management and handling, nor how to respond to emergencies. There may have been an economic benefit to the facility by not providing training. This does not meet the definition of minor violation as described in HSC, Section 25404(a)(3).
 - CERS indicates 70 of 88 (80%) violations cited between January 1, 2020, through December 31, 2022, for failure to provide or conduct training for employees were cited as a minor violation. Examples include, but are not limited to:
 - CERS ID 10067383: inspection dated January 16, 2021
 - CERS ID 10156761: inspection dated May 26, 2021
 - CERS ID 10445923: inspection dated March 10, 2022
- Violation for failure to accumulate hazardous waste in a container that is in good condition (CCR, Title 22, Section 66262.34) incorrectly cited as a minor violation. Storage of hazardous waste in damaged containers may lead to a release of hazardous waste to the environment. Failure to accumulate hazardous waste in a container that is in good condition may result in a failure to prevent releases of hazardous waste or constituents to the environment. This does not meet the definition of a minor violation as defined in HSC, Section 25404(a)(3).
 - CERS indicates 33 of 35 (94%) violations cited between January 1, 2020, through December 31, 2022, for failure to accumulate hazardous waste in a container that is in good condition were cited as a minor violation. Examples include, but are not limited to:
 - CERS ID 10782052: inspection dated July 27, 2021
 - CERS ID 10065964: inspection dated August 3, 2021
 - CERS ID 10764424: inspection dated October 17, 2022
- Violation for failure to accumulate or store hazardous waste in containers made of or lined with materials which will not react with, and are otherwise compatible with, the hazardous waste to be stored (CCR, Title 22, Section 66262.34) incorrectly cited as a minor violation. Failure to store hazardous wastes in containers which will not react with, and are otherwise compatible with, the hazardous waste to be stored may result in a significant threat to human health or safety or the environment. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3).
 - CERS indicates 10 of 10 (100%) violations cited between January 1, 2020, and December 31, 2022, for failure to accumulate or store hazardous waste in containers made of or lined with materials which will not react with, and are otherwise compatible with, the hazardous waste to be stored were cited as a minor violation. Examples include, but are not limited to:
 - CERS ID 10764241: inspection date August 27, 2021
 - CERS ID 10757719: inspection date February 11, 2022
 - CERS ID 10877740: inspection date June 7, 2022

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- Violation for failure to separate incompatible wastes [CCR, Title 22, Section 66265.173 and CCR, Title 22, Section 66262.34(d)(2)] incorrectly cited as a minor violation. Failure to separate incompatible wastes may result in a significant threat to human health or safety or the environment. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3).
 - CERS indicates 9 of 10 (90%) violations cited between January 1, 2020, through December 31, 2022, for failure to separate incompatible wastes were cited as a minor violation. Examples include, but are not limited to:
 - CERS ID 10689997: inspection date February 11, 2020
 - CERS ID 10737526: inspection date April 9, 2021
 - CERS ID 10731691: inspection date June 1, 2021
- Violation for failure to minimize the possibility of a fire, explosion, or release of hazardous waste to the environment [CCR, Title 22, Section 66265.31 and CCR, Title 22, Section 66262.34(d)(2)] incorrectly cited as a minor violation. Failure to minimize the possibility of a fire, explosion, or release may pose a significant threat to human health or safety or the environment, or failure to ensure prevention of releases of hazardous waste or constituents to the environment. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3).
 - CERS indicates 49 of 161 (30%) violations cited between January 1, 2020, through December 31, 2022, for failure to minimize the possibility of a fire, explosion, or release of a hazardous waste to the environment were cited as a minor violation. Examples include, but are not limited to:
 - CERS ID 10067383: inspection date January 16, 2021
 - CERS ID 10071769: inspection date February 9, 2022
 - CERS ID 10723768: inspection date February 9, 2022

CITATION:

HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6

HSC, Chapter 6.11, Section 25404(a)(3)

CCR, Title 22, Section 66260.10

[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will train inspection staff on the definition of minor violation as defined in HSC, Chapter 6.11, Section 25404(a)(3) and Class I, and Class II violations, as defined in:

- HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6 and
- CCR, Title 22, Section 66260.10

The CUPA will train inspection staff on how to properly classify HWG Program violations as minor, Class I and Class II. Training should include, at minimum, review of the following:

- Violation Classification Training Video 2014
<https://www.youtube.com/watch?v=RB-5V6RfPH8>
 - Additional violation classification classes are available in the video library on the CalCUPA Forum Board website at: <http://www.calcupa.org/video.html>.
- 2020 Violation Classification Guidance for Unified Program Agencies

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<https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violation-Classification-Guidance-Document-accessible.pdf>

- This document provides examples of what is considered minor versus non-minor violations.

The CUPA will provide CalEPA with training documentation to CalEPA, which at minimum will include, the date training was conducted, an outline of the training conducted, and a list of CUPA inspection staff in attendance.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an inspection report citing at least one HWG Program violation, for three HWG Program facilities, as requested by DTSC, that have been inspected after training has been completed and within the last three months. Each inspection report will contain observations, factual basis, and corrective actions to correctly identify and classify each observed HWG Program violation.

4. DEFICIENCY:

Required components of the I&E Plan are missing or incomplete.

The following component is missing:

- An indication that the I&E Plan is reviewed annually, at minimum.

The following component is incomplete:

- Provisions for ensuring sampling capability
 - Though the I&E Plan discusses collecting and using samples as evidence, it does not describe the sampling capabilities of the CUPA. Sampling capability information should include training, identification of sampling equipment, methods to preserve physical evidence obtained through sampling and testing information. This information was required when the CUPA became certified and is necessary to proceed with any potential enforcement actions as needed.

CITATION:

CCR, Title 27, Section 15200(a)
[CalEPA, DTSC]

CORRECTIVE ACTION:

During the evaluation, the CUPA revised the I&E Plan to adequately incorporate and correctly address the missing component. The I&E Plan now includes an indication that it is reviewed annually, at minimum.

By the 1st Progress Report, the CUPA will review and revise the I&E Plan to adequately incorporate and correctly address all required components. The CUPA will provide the revised I&E Plan to CalEPA.

By the 2nd Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from CalEPA and/or DTSC, the CUPA will provide the amended I&E Plan to CalEPA. If no amendments are necessary, the CUPA will train CUPA personnel on the revised I&E Plan.

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The CUPA will provide training documentation to CalEPA, which at minimum will include the date training was conducted, an outline of the training conducted and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the revised I&E Plan.

By the 3rd Progress Report, if amendments to the revised I&E Plan were necessary, the CUPA will train CUPA personnel on the amended I&E Plan. The CUPA will provide training documentation to CalEPA, which at minimum will include the date training was conducted, an outline of the training conducted, and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the amended I&E Plan.

Note: The CUPA has requested DTSC to provide onsite sampling training. Due to staffing shortages, DTSC is unable to provide the requested training prior to the issuance of this Final Summary of Findings Report, however, DTSC is currently arranging to offer sampling training in the near future. DTSC encourages the CUPA to begin drafting a sampling procedure using the example sampling plans provided. The CUPA can revise the draft sampling procedure, making any desired changes or refinements, following receipt of training provided by DTSC.

5. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not properly reviewing, processing, and authorizing each annual Onsite Hazardous Waste Treatment Notification for Permit-By-Rule (PBR) facilities with a Fixed Treatment Unit (FTU) within 45 calendar days of receipt.

During the 45-day review process the CUPA must:

- Authorize operation of the FTU; or
- Deny authorization of the FTU in accordance with PBR laws and regulations; or,
- Notify the owner/operator that the notification submittal is inaccurate or incomplete.

Review of CERS CME information finds the following PBR Onsite Hazardous Waste Treatment Notifications submitted between January 1, 2020, and December 31, 2022, were not reviewed, processed, or authorized by the CUPA within 45 days of receipt:

- 16 of 38 (42%)
 - Examples include:
 - CERS ID 10591699
 - PBR notification submitted February 26, 2021, and authorized February 16, 2022
 - PBR notification submitted February 28, 2022, and authorized April 29, 2022
 - CERS ID 10063930
 - PBR notification submitted May 10, 2021, and authorized February 10, 2022.
 - PBR notification submitted December 2, 2021, and authorized February 10, 2022
 - PBR notification submitted December 22, 2021, and authorized February 24, 2022

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- CERS ID 10071769
 - PBR notification submitted December 18, 2020, and authorized March 22, 2021.
 - PBR notification submitted December 16, 2021, and authorized April 23, 2023
 - PBR notification submitted December 15, 2022, and authorized April 21, 2023

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was corrected during the Evaluation Progress Report process.

CITATION:

CCR, Title 22, Sections 67450.2(b)(4) and 67450.3(c)(1) and (d)
[DTSC]

CORRECTIVE ACTION: COMPLETED

During the evaluation, the CUPA identified why annual Onsite Hazardous Waste Treatment Notifications for Permit-By-Rule (PBR) facilities with a Fixed Treatment Unit (FTU) were not properly reviewed, processed, and authorized within 45 calendar days of receipt. The CUPA developed an updated policy for reviewing notifications and ensured the policy was made available to all staff. Staff were trained on the updated policy.

The CUPA has demonstrated accurate and timely review, processing and authorization of Onsite Hazardous Waste Treatment Notifications following the training of staff. This deficiency is considered corrected.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

An incidental finding is considered a minor deviation in implementation of the Unified Program from the expected standards set forth in statute or regulation. Commonly identified as a minor issue that may be problematic in implementation of one or more program elements, an incidental finding is not likely to have an impact on the safety and protection of human health and the environment.

1. INCIDENTAL FINDING:

The CUPA is not ensuring all regulated businesses subject to the business plan reporting requirements annually submit an HMBP or a no-change certification to CERS.

Review of HMBPs submitted to CERS between April 17, 2022, and May 17, 2023, by regulated businesses subject to Business Plan reporting requirements finds:

- 415 of 2,968 (14%) business plan facilities have not submitted a chemical inventory (including site map) or a no-change certification within the last 12 months.
- 434 of 2,968 (15%) business plan facilities have not submitted emergency response and employee training plans or a no-change certification within the last 12 months.

Note: This incidental finding was identified as a deficiency during the 2018 CUPA Performance Evaluation and was corrected during the Evaluation Progress Report process.

CITATION:

HSC, Chapter 6.95, Sections 25505(a), 25508(a), and 25508.2.
[CalEPA]

RESOLUTION:

Note: With each Progress Report until considered corrected, CalEPA will review CERS information to identify each regulated business subject to Business Plan reporting requirements that has not submitted an HMBP or a no-change certification to CERS within the last 12 months.

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure all businesses subject to business plan reporting requirements annually submit an HMBP or a no-change certification to CERS. The action plan, at minimum, will include steps to follow up with those facilities that have not submitted an HMBP or a no-change certification to CERS within the last 12 months, such as correspondence or other communication with regulated businesses.

By the 4th Progress Report, the CUPA will ensure each regulated business subject to business plan reporting requirements has submitted a business plan or a no-change certification to CERS within the last 12 months, or the CUPA will have applied enforcement.

2. INCIDENTAL FINDING:

The CUPA is not consistently ensuring HMBP submittals are thoroughly reviewed and contain all applicable required elements before being accepted in CERS.

Review of 15 HMBP CERS submittals finds the following 7 (46%) were recently accepted with missing or incomplete required elements:

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- CERS ID 10831315
 - Plans submitted and accepted on March 22, 2023
 - Missing required emergency response plan element such as immediate notification contacts to the appropriate local emergency response personnel and to the unified program agency.
- CERS ID 10064008
 - Inventory submitted on April 7, 2023, and accepted on May 17, 2023
 - Missing required site map elements such as emergency shutoffs.
- CERS ID 10064242
 - Inventory submitted and accepted on April 13, 2022
 - Missing required site map element such as emergency shutoffs.
- CERS ID 10071769
 - Inventory submitted on April 15, 2022, and accepted on June 27, 2022
 - Missing required site map elements such as adjacent streets and evacuation staging areas.
- CERS ID 10735747
 - Inventory submitted on May 8, 2023, and accepted on May 9, 2023
 - Missing required site map element such as adjacent streets.
- CERS ID 10068703
 - Plans submitted on June 29, 2022, and accepted on July 27, 2022
 - Missing required emergency response plan element such as immediate notification contacts to the appropriate local emergency response personnel and to the unified program agency.
- CERS ID 10063429
 - Inventory submitted on December 9, 2022, and accepted on January 9, 2023
 - Missing required site map element such as internal roads.

Note: The examples provided above may not represent all instances of this deficiency.

CITATION:

HSC, Chapter 6.95, Sections 25505(a) and 25508(a)
[CalEPA]

RESOLUTION:

During the evaluation, the CUPA accepted a complete HMBP for the following facilities:

- CERS ID 10064242
- CERS ID 10071769
- CERS ID 10735747
- CERS ID 10068703
- CERS ID 10063429

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each future HMBP submittal is thoroughly reviewed and contains all applicable required elements before being accepted in CERS. The action plan will include steps to follow up with regulated businesses whose HMBP submittals were reviewed and identified with missing or incomplete components.

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By the 2nd Progress Report, the CUPA will train personnel on the steps in the action plan. The CUPA will provide training documentation to CalEPA, which at minimum will include the date training was conducted, an outline of the training conducted, and a list of CUPA personnel in attendance.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide a narrative of the implementation of the action plan.

By the 4th Progress Report, the CUPA will ensure each HMBP facility has annually submitted a complete HMBP to CERS, or the CUPA will have applied enforcement.

3. INCIDENTAL FINDING:

The CUPA is not consistently citing construction violations at existing used oil UST systems, nor requiring the correction of construction violations identified in State Water Board Local Guidance (LG) Letter 150 dated February 2021.

Review of the CERS Facility/Tank Data Download information finds USTs at the following USTs have single-walled vent or tank risers, and do not meet the secondary containment exemption requirements of CCR, Title 23, Section 2636(a) for vent and riser pipe to have overfill prevention equipment meeting the requirements specified in CCR, Title 23, Section 2635(c)(1)(B) or (C):

- CERS Tank ID 10065703-003
- CERS Tank ID 10341529-003
- CERS Tank ID 10063678-004
- CERS Tank ID 10070869-003
- CERS Tank ID 10066480-004
- CERS Tank ID 10065484-005
- CERS Tank ID 10065481-004
- CERS Tank ID 10064050-001
- CERS Tank ID 10065502-003
- CERS Tank ID 10066396-004

Note: State Water Board CUPA Evaluation Guidance Documents, Single-Walled Vent or Riser Piping (<https://www.waterboards.ca.gov/ust/single-walled-vent-riser.html>) and the State Water Board LG 150-3 (https://waterboards.ca.gov/water_issues/programs/ust/leak_prevention/lgs/docs/150-3.pdf) may be referenced.

CITATION:

CCR, Title 23, Section 2631(a), 2636(a) and 2635(c)(1)
[State Water Board]

RESOLUTION:

The CUPA must ensure UST systems are properly constructed and meet the secondary containment requirements of CCR, Title 23, Section 2636(a).

By the 1st Progress Report, the CUPA will identify and provide CalEPA with a list of UST facilities (including the CERS ID and Tank ID), which are incorrectly utilizing the overfill prevention equipment exemption.

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By the 1st Progress Report, the CUPA will draft and provide to CalEPA written correspondence addressed to the UST facility owner(s) or operator(s) to inform the UST owner(s) or operator(s) of the requirement for installation of overfill prevention equipment, or to construct secondary containment for single-walled vent and tank risers. The written correspondence will include language stating that failure to comply with overfill prevention equipment requirements specified in CCR, Title 23, Section 2635(c)(1)(B) or (C), or secondary containment exemptions in CCR, Title 23, Section 2636(a) will lead to enforcement. The State Water Board will review the draft written correspondence before the CUPA distributes it to the UST facility owner(s) or operator(s) identified as incorrectly utilizing the overfill prevention equipment exemption.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an updated list, indicating the status of each UST obtaining compliance. If appropriate steps have not been taken by the UST owner(s) or operator(s) to remedy the construction violations, the CUPA will apply enforcement. The CUPA will provide CalEPA with documentation of the applied enforcement.

By the 2nd Progress Report, if revisions to the draft written correspondence addressed to the UST facility owner(s) or operator(s) are necessary based on feedback from the State Water Board, the CUPA will revise the written correspondence and will provide the revised written correspondence to CalEPA. If no revisions are necessary, the CUPA will finalize the draft written correspondence and distribute it to UST facility owner(s) or operator(s) identified as incorrectly utilizing the overfill prevention equipment exemption. The CUPA will include the State Water Board as a carbon copy recipient on the correspondence.

By the 3rd Progress Report, if revisions to the written draft correspondence were necessary, the CUPA will finalize the draft written correspondence and distribute it to UST facility owner(s) or operator(s) identified as incorrectly utilizing the overfill prevention equipment exemption. The CUPA will include the State Water Board as a carbon copy recipient on the correspondence.

By the 3rd Progress Report, if appropriate steps have not been taken by the UST owner(s) or operator(s) to remedy the construction violations, the CUPA will apply enforcement. The CUPA will provide CalEPA with documentation of the applied enforcement.

The State Water Board will consider this incidental finding resolved when the CUPA has applied administrative, or when the UST owner(s) or operator(s) install the correct overfill prevention equipment, or secondarily contain the vent and fill piping.

4. INCIDENTAL FINDING:

The CUPA is not ensuring UST Program related information in CERS is accurate and complete.

Review of the UST Facility/Tank Data Download and the UST Facility Search reports obtained from CERS on May 18, 2023, finds the following:

- UST monitoring and construction information is incorrect for the following single-walled USTs:
 - 20 of 86 (23%) list "Yes" for continuous electronic tank monitoring
 - 5 of 16 (31%) list mechanical line leak detectors for pressurized piping
 - 16 of 16 (100%) are without pipeline integrity testing for pressurized piping

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- 3 of 3 (100%) with gravity piping installed on or before July 1, 1987, do not have pipeline integrity testing every 24 months
- 12 of 32 (38%) listed piping as "Yes" for continuous secondary monitoring.
- 6 of 11 (55%) steel USTs are not marked as "Steel+Internal Lining" or "Steel + Bladder" under "Tank Construction."
- 149 inconsistent uses of the "Type of Action" reporting element for tanks that have changed ownership. The following are examples:
 - CERS ID 10130410 and CERS ID 10836580 are listed as "Split Facility," however, both facilities list the following USTs:
 - CERS UST tank ID 10130410-001, -002, -003
 - CERS ID 10066147 is listed as "Confirmed/Updated Information" and CERS ID 10890004 is listed as "Split Facility," however, both facilities list the following USTs:
 - CERS UST tank ID 10066147-001, -002, -003
 - CERS ID 10065691 is listed as "Confirmed/Updated Information" and CERS ID 10901719 is listed as "New Permit," however, both facilities list the following USTs:
 - CERS UST tank ID 10065691-001, -002, -003, -004
 - CERS ID 10121845 and CERS ID 10741978 are located at the same address with the following USTs:
 - CERS UST tank ID 10121845-001, -002, -003
 - Installed January 1, 1997, closed August 16, 2017
 - Facility is listed as "UST Permanent Closure on Site"
 - CERS UST tank ID 10741978-001, -002, -003
 - Installed January 1, 1997
 - Facility is listed as "Confirmed/Updated Information"
- USTs are reported as "Confirmed/Updated Information" with an accepted closure date in CERS:
 - CERS UST tank ID 10066633-007
 - Closed January 24, 2015
 - CERS UST tank ID 10066534-004
 - Closed August 28, 2019
- UST facilities are reporting as "Applicable" at the same address:
 - CERS ID 10899046
 - CERS ID 10066525

Note: The examples provided above may not represent all instances of this Incidental Finding.

Note: This Incidental Finding was identified as a deficiency in the 2018 CUPA Performance Evaluation and was corrected during the Evaluation Progress Report process.

Note: The following CERS Frequently Asked Questions (FAQs) guidance documents and State Water Board correspondence may be referenced, and are available in CERS and at www.waterboards.ca.gov/ust/cers/faqs.html:

- Common CERS Reporting Errors
- Setting Accepted Submittal Status
- General Reporting Requirements for USTs
- Which Forms Require Uploading to CERS
- When to Review Underground Storage Tank (UST) Records, dated November 29, 2016

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CITATION:

CCR, Title 23, Sections 2636(a)(3) and (e), 2634(d)(2), 2641(g) and (h), 2662(c), and 2711(d)
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will review, and revise as necessary, the Data Management Procedure, or other applicable procedure, to ensure establishment of a process for UST inspection staff to review CERS UST submittal information regarding construction monitoring requirements for accuracy and completeness before being accepted in CERS. The procedure will, at minimum, include the following:

- When CERS UST submittal information is identified as correct, the submittal will be accepted;
- When CERS UST submittal information is identified as incorrect, the submittal will be:
 - accepted with minor errors using a condition set in CERS requiring the submittal to be corrected and resubmitted within a certain timeframe or;
 - not accepted with comments provided requiring resubmittal within a specified time.
 - When CERS UST submittal information is not corrected and resubmitted within the timeframe specified, enforcement will be applied per the I&E Plan.
- Resolving duplicate USTs due to Applicability and reporting status.

The CUPA will provide the revised Data Management Procedure, or other applicable procedure to CalEPA. The CUPA will contact the State Water Board for any assistance needed.

By the 2nd Progress Report, if amendments to the revised Data Management Procedure, or other applicable procedure are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended Data Management Procedure, or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised Data Management Procedure, or other applicable procedure. Once training is complete, the CUPA will implement the revised Data Management Procedure, or other applicable procedure.

By the 3rd Progress Report, if amendments to the revised Data Management Procedure, or other applicable procedure were necessary, the CUPA will train UST inspection staff on the amended Data Management Procedure, or other applicable procedure. Once training is complete, the CUPA will implement the amended Data Management Procedure, or other applicable procedure.

With respect to UST submittals already accepted in CERS, the CUPA will review UST related information and require accurate and complete UST submittals when the next submittal is made, but no later than the next annual UST compliance inspection, to ensure information is accurate and complete regarding monitoring and construction requirements before being accepted.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the State Water Board will review five UST submittals accepted by the CUPA in CERS after UST inspection staff receive training on the revised or amended Data Management Procedure, or other applicable procedure.

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5. INCIDENTAL FINDING:

The CUPA is not consistently classifying APSA Program violations properly.

Review of CERS CME information between July 1, 2017, and June 30, 2022, indicates the following non-minor violations were classified as minor violations in the following instances:

- Not having, or failure to prepare, a Spill Prevention, Control, and Countermeasure (SPCC) Plan was cited as a minor violation. Facilities that operate without an SPCC Plan present a significant threat to human health or the environment and may benefit economically from noncompliance either by reduced costs or by competitive advantage. This does not meet the definition of a minor violation as defined in HSC, Section 25404(a)(3). In addition, classifying a violation for not having an SPCC Plan as minor is inconsistent with, and less stringent, than the U.S. EPA.
 - FY 2017/2018 through FY 2021/2022: 7 violations

Note: The Federal SPCC rule is not delegated to any state. However, APSA requires consistency and compliance with the SPCC rule for SPCC Plan preparation and implementation, as well as consistency with Federal enforcement guidance.

Note: This incidental finding was identified as a deficiency in the 2018 CUPA Performance Evaluation and was corrected during the Evaluation Progress Report process.

CITATION:

HSC, Chapter 6.11, Sections 25404(a)(3), 25404.2(a)(3)-(4)
HSC, Chapter 6.67, Sections 25270.4.1(c), 25270.4.5(a)
CCR, Title 27, Section 15200(a)
[OSFM]

RESOLUTION:

By the 1st Progress Report, the CUPA will train inspection staff on the definition of minor violation as defined in HSC, Chapter 6.11, Section 25404(a)(3) and how to properly classify violations during compliance inspections as minor, Class I, and Class II. Training should include, at minimum, review of:

- 2020 Violation Classification Guidance for Unified Program Agencies (<https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violation-Classification-Guidance-Documents-accessible.pdf>), and
 - “U.S. EPA Civil Penalty Policy for Section 311(b)(3) and Section 311(j) of the Clean Water Act, August 1998,” which specifies that a no SPCC Plan violation is not considered minor (<https://19january2017snapshot.epa.gov/enforcement/civil-penalty-policy-section-311b3-and-section-311j-clean-water-act-cwa-august-1998.html>),
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6. INCIDENTAL FINDING:

The established Unified Program administrative procedures have components that are incomplete or inaccurate.

The following Unified Program administrative procedures are incomplete:

- Public Participation
 - Procedure to coordinate, consolidate, and make consistent locally required public hearings and notices related to any Unified Program element.
 - The “Public Participation” procedure, included within the annual Self-Audit Report, only addresses public notices related to the CalARP Program. The section of the report does not identify a procedure for coordinating, consolidating, and making consistent locally required public hearings and notices related to any Unified Program element.
- Records Maintenance
 - Identification of records maintained
 - The CUPA has not identified the following documents as being retained for the minimum retention time of five years: all records related to hazardous waste enforcement actions from the date the enforcement action is resolved, detailed records used to produce the summary reports submitted to the state, surcharge billing and collection records following the closure of any billing period, and training records required by CCR, Title 27, Section 15260.
 - Proper disposal methods
 - The “San Mateo CUPA Document Retention” procedure does not identify disposal methods.

The following Unified Program administrative procedures have components that are inaccurate:

- Information, Collection, Retention and Management
 - The Data Management Procedure document is inaccurate as follows:
 - Page 1 states: “Per CCR 15185(c) the CUPA shall retain copies of self-audits, inspection reports, enforcement files and UPCFs for a minimum of five years.”
 - The correct citation is 15185(b)
 - Page 2 states: “Per CCR 15185(f) the CUPA does not collect any locally required supplemental information, at this time.”
 - The correct citation is 15185(e)(3)

CITATION:

CCR, Title 27, Sections 15180(e), 15185(b) and (f), 15190, 15210 and 15220
[CalEPA]

RESOLUTION:

During the evaluation, the CUPA revised the following incomplete and inaccurate components of the Unified Program administrative procedures:

- Records Maintenance
- Information, Collection, Retention and Management

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By the 1st Progress Report, the CUPA will provide CalEPA with the revised Unified Program administrative procedures that adequately incorporate all required components.

By the 2nd Progress Report, if amendments to the revised Unified Program administrative procedures, are necessary based on feedback from CalEPA, the CUPA will provide CalEPA with the amended Unified Program administrative procedures. If no amendments are necessary, the CUPA will train CUPA personnel on the revised Unified Program administrative procedures. Once training is complete, the CUPA will implement the revised Unified Program administrative procedures.

By the 3rd Progress Report, if amendments to the revised Unified Program administrative procedures were necessary, the CUPA will train CUPA personnel on the amended Unified Program administrative procedures. Once training is complete, the CUPA will implement the amended Unified Program administrative procedures.

7. INCIDENTAL FINDING:

The CUPA is not consistently ensuring RTC is obtained for cited HWG Program violations within 30 days.

Review of CERS CME information between January 1, 2020, and December 31, 2022, finds:

- RTC was not obtained within 30 days of being cited for the following minor violations:
 - 2,284 obtained RTC over 35 days
 - 1,708 obtained RTC over 90 days
 - CERS ID 10647262
 - Inspection dated December 23, 2020, cites violations.
 - The facility did not obtain RTC.
 - No follow-up actions are noted in the data management system or facility file.
 - CERS ID 10071769
 - Inspection dated November 20, 2020, cites violations.
 - CERS indicates RTC was obtained on November 15, 2021, which is beyond the scheduled RTC timeframe.
 - No follow-up actions are noted in the data management system or facility file.
 - CERS ID 10064008
 - Inspection dated December 20, 2020, cites violations.
 - CERS indicates RTC was obtained on April 9, 2021, which is beyond the scheduled RTC timeframe.
 - No follow-up actions are noted in the data management system or facility file.

Note: The examples provided above may not represent all instances of this incidental finding.

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CITATION:

HSC, Chapter 6.5, Sections 25110.8.5, 25117.6, and 25187.8(b) and (g)
HSC, Chapter 6.7, Section 25288(d)
HSC, Chapter 6.11, Section 25404.1.2(c)
CCR, Title 27, Sections 15185(a) and (c) and 15200(a) and (e)
[DTSC]

RESOLUTION:

By the 1st Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a sortable spreadsheet obtained from the CUPA's data management system or CERS that includes at minimum the following information for each HWG facility with an open violation (no RTC) cited between January 1, 2020, and December 31, 2022:

- Facility name;
- CERS ID;
- Inspection and violation dates;
- Scheduled RTC date;
- Actual RTC date (when applicable);
- RTC qualifier; and
- In the absence of obtained RTC, a narrative of any applied enforcement or follow-up activity to ensure the facility obtains RTC. The CUPA is encouraged to ensure the I&E Plan is implemented to pursue compliance at facilities.

The CUPA will prioritize follow-up actions with each facility based on the level of hazard present to public health and the environment.

8. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The 2021 area plan is missing required elements.

Review of the 2021 area plan finds the following required elements are missing:

- Provisions for training of emergency response personnel in the following areas:
 - Emergency procedures for first response to pesticide drift exposure incidents
 - Procedures for access to mutual-aid resources
 - Identification of medical facilities capable of providing treatment appropriate for hazardous material incidents, to include pesticide drift exposure incidents
 - Evacuation plans and procedures
 - First-aid procedures for hazardous material incidents, including pesticide exposure
 - Informing the public during emergencies.
- Provisions for evacuation plans that provide for in the following areas:
 - Properties of hazardous materials, such as quantity, concentration, vapor pressure, density, and potential health effects.
 - Possible release scenarios.
 - Facility characteristics, topography, meteorology, and demography of potentially affected areas.

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CITATION:

HSC, Chapter 6.95, Section 25503(c)
CCR, Title 19, Sections 2640 and 2642 through 2648
[CalEPA]

RESOLUTION: COMPLETED

An updated area plan was provided that included the missing required elements. This Incidental Finding is considered resolved.

9. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The California Accidental Release Prevention (CalARP) Dispute Resolution Process is missing a required element.

Review of the CalARP Dispute Resolution Process finds the following element is missing:

- Procedures that require the CUPA to render a written decision within 120 days after the owner or operator of a stationary source initiates the dispute resolution process.

CITATION:

CCR, Title 19, Section 2780.1(a)(3)
[CalEPA]

RESOLUTION: COMPLETED

An updated area plan was provided that included the missing required elements. This Incidental Finding is considered resolved.

10. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The Self-Audit Reports for FYs 2019/2020, 2020/2021, and 2021/2022, are missing a required component.

The following component is missing:

- The annual review and update of the fee accountability program as required by CCR, Title 27, Section 15220
 - The “Summary of the Fee Accountability Annual Review” section of the Self-Audit Reports for the last three FYs contains information that is not specific to each FY. This section should include a discussion of the annual review and update of the fee accountability program specific to the previous FY.

CITATION:

CCR, Title 27, Section 15280
[CalEPA]

RESOLUTION: COMPLETED

During the evaluation, the CUPA provided CalEPA with the Self-Audit Report for FY 2022/2023 which includes all required components, including the annual review and update of the fee accountability program. This Incidental Finding is considered resolved.

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OBSERVATIONS AND RECOMMENDATIONS

Observations and recommendations identify areas of Unified Program implementation that could be improved and provide suggestions for improvement. Though the CUPA is not required by regulation or statute to apply the recommendations provided, the CUPA would benefit in applying the recommendations provided to improve the overall implementation of the Unified Program.

1. OBSERVATION:

The following is a summary of inspection and violation information for the HMBP and CalARP Programs based on review of facility files and CERS CME information between April 1, 2020, and March 31, 2023.

HMBP Program

- April 1, 2020 through March 31, 2021
 - The CUPA conducted 1,139 routine inspections, of which 665 (58%) had no violations cited and 474 (42%) had at least one violation cited.
 - A total of 906 violations were cited, consisting of:
 - 171 (19%) Class II violations, and
 - 735 (81%) minor violations.
 - The CUPA has ensured RTC for 885 of 906 (98%) violations cited.
- April 1, 2021 through March 31, 2022
 - The CUPA conducted 1,639 routine inspections, of which 840 (51%) had no violations cited and 799 (49%) had at least one violation cited.
 - A total of 1,893 violations were cited, consisting of:
 - 449 (24%) Class II violations, and
 - 1,444 (76%) minor violations.
 - The CUPA has ensured RTC for 1,861 of 1,893 (98%) violations cited.
- April 1, 2022 through March 31, 2023
 - The CUPA conducted 1,261 routine inspections, of which 702 (56%) had no violations cited and 559 (44%) had at least one violation cited.
 - A total of 1,379 violations were cited, consisting of:
 - 1 (1%) Class I violation,
 - 217 (15%) Class II violations, and
 - 1,161 (84%) minor violations.
 - The CUPA has ensured RTC for 1,068 of 1,379 (77%) violations cited.

CalARP Program

- April 1, 2020 through March 31, 2021
 - The CUPA conducted 3 routine inspections, of which each had at least one violation cited.
 - A total of 10 minor violations were cited.
 - The CUPA has ensured RTC for 10 of 10 (100%) violations cited.
- April 1, 2021 through March 31, 2022
 - The CUPA conducted 2 routine inspections, of which each had at least one violation cited.
 - A total of 6 minor violations were cited.
 - The CUPA has ensured RTC for 6 of 6 (100%) violations cited.

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- April 1, 2022 through March 31, 2023
 - The CUPA conducted 5 routine inspections, of which 2 (40%) had no violations cited and 3 (60%) had at least one violation cited.
 - A total of 7 violations were cited, consisting of:
 - 2 (29%) Class II violations, and
 - 5 (71%) minor violations.
 - The CUPA has ensured RTC for 7 of 7 (100%) violations cited.

RECOMMENDATION:

Maintain the three-year inspection frequency for all HMBP facilities and all CalARP facilities, as required by statute. Ensure complete and thorough inspections are conducted to identify all violations at facilities. Maintain detailed inspection reports that include all factual basis and proper citation for each identified violation. Follow up with facilities that have not obtained RTC by the scheduled RTC date and apply enforcement per the I&E Plan.

2. OBSERVATION:

The annual CalARP Performance Audit Reports for FYs 2019/2020, 2020/2021, and 2021/2022 have an inaccurate component.

The following component is inaccurate:

- A summary of the personnel years (PYs) necessary to directly implement, administer, and operate the CalARP Program.
 - The CUPA summarizes PYs as the years of personnel experience for the personnel involved in the program rather than the time necessary to directly implement, administer, and operate the CalARP Program, as required in CCR, Title 19 Section 2780.5(b)(7).

RECOMMENDATION:

With the annual CalARP Performance Audit for FY 2022/2023, ensure all components required by CCR, Title 19, Section 2780.5 are addressed, including a summary of the personnel and PYs necessary to directly implement, administer, and operate the CalARP Program.

3. OBSERVATION:

Review of CERS finds 56 UST systems have single-walled components which require permanent closure by December 31, 2025, in accordance with HSC Chapter 6.7, Section 25292.05. The following are examples:

- CERS ID 10890004
- CERS ID 10066333
- CERS ID 10066600
- CERS ID 10070338
- CERS ID 10065475

Note: The examples provided above may not represent all instances of observation.

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RECOMMENDATION:

Continue to provide verbal and written reminders to all applicable UST owners/operators regarding the December 31, 2025, deadline for permanent closure of single-walled USTs.

4. OBSERVATION:

Multiple APSA tank facilities submitted an HMBP to CERS in lieu of a tank facility statement using an outdated emergency response and training plans template.

RECOMMENDATION:

Encourage each APSA tank facility that utilizes the consolidated emergency response and training plans template as part of the HMBP submittal, in lieu of the tank facility statement, to use the current 2022 version. The 2022 template is available in CERS at <https://calepa.ca.gov/wp-content/uploads/sites/6/2022/03/Emergency-Response-Plan-corrected-6-27-22.pdf>, on the CERS Central Business webpage at <https://cers.calepa.ca.gov/businesses/>, under Consolidated Emergency Response/Contingency Plan/Template, and on the CalEPA Unified Program Publications and Guidance webpage at <https://calepa.ca.gov/cupa/publications/>, under “Business-to-CUPA Reporting Forms.”

5. OBSERVATION:

The Self-Audit Reports for FYs 2019/2020, 2020/2021, and 2021/2022 contain information that may benefit from improvement.

- The total number of APSA violations reported in the Self-Audit Report is different than the total number of APSA violations reflected in CERS:
 - FY 2019/2020 Self-Audit Report
 - A total of 110 APSA violations are reported, consisting of two Class I violations, 24 Class II violations and 84 minor violations. CERS reflects a total of 108 violations issued, consisting of two Class I violations, 23 Class II violations and 83 minor violations.
 - FY 2020/2021 Self-Audit Report
 - A total of 153 APSA violations are reported, consisting of one Class I violation, 24 Class II violations and 128 minor violations. CERS reflects a total of 160 violations issued, consisting of one Class I violation, 28 Class II violations and 131 minor violations.
 - FY 2021/2022 Self-Audit Report
 - A total of 198 APSA violations are reported, consisting of eight Class I violations, 29 Class II violations and 161 minor violations. CERS reflects a total of 193 violations issued, consisting of eight Class I violations, 28 Class II violations and 157 minor violations.
- Remove reference to SPCC. Unified Program Agencies enforce the APSA Program and not all tank facilities are required to prepare an SPCC Plan under APSA. The reference to SPCC should be removed where it is not applicable as follows:
 - FY 2019/2020 Self-Audit Report, pages 5 and 26
 - FY 2020/2021 Self-Audit Report, pages 6, 27, and 28
 - FY 2021/2022 Self-Audit Report, pages 2 and 24

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RECOMMENDATION:

For future Self-Audit Reports, ensure the number of violations reported is correct and consistent with what is reflected in CERS CME information and do not include reference to SPCC where it is not applicable.

6. OBSERVATION:

The CUPA has webpages that contain information that is inaccurate and may benefit from improvement.

- Aboveground Petroleum Storage Tank webpage (<https://www.smchealth.org/cupa/ast>):
 - The discussion on APSA applicability is inaccurate. Aside from tank facilities storing 1,320 gallons or more of petroleum, APSA also regulates tank facilities that are subject to the Federal SPCC rule and tank facilities with one or more 55-gallon or larger tanks in underground areas (TIUGAs) regardless of the 1,320-gallon threshold.
 - The Aboveground Petroleum Storage Tank Facility Statement link leads to a webpage on federal requirements for aboveground storage tanks (<https://www.fedcenter.gov/assistance/facilitytour/tanks/aboveground/>). Replace the link with the correct tank facility statement link (<https://osfm.fire.ca.gov/media/10715/apsa-tank-facility-statement.pdf>).
 - The link to the Office of the State Fire Marshal website is invalid, replace with valid link (<https://osfm.fire.ca.gov/>).
 - The link to the County of San Diego “How to Prepare [Your] Own SPCC Plan” Training is no longer valid.
- CUPA Forms webpage (<https://www.smchealth.org/post/certified-unified-program-agency-cupa-forms>):
 - The HMBP site map instructions should also include applicable emergency shutoff for hazardous materials systems, such as fuel tank systems since emergency shutoff is not limited to utilities.

RECOMMENDATION:

Update the identified webpages with the above recommendations.

7. OBSERVATION:

Review of CERS CME information and APSA tank facility files provided by the CUPA indicates the following:

- CERS ID 10066888:
 - An inspection report, dated March 2, 2022, cites one violation, and shows four violations as undetermined.
 - Undetermined violations are summarized in the observations section of the inspection report along with required action(s). Additional facility records (email correspondences) state, “Observations that are made must also be addressed. Observations that are not resolved in 30 days may automatically convert to a violation.”

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- CERS reflects three violations for an inspection dated March 2, 2022.
- CERS ID 10070962:
 - An inspection report, dated November 12, 2021, cites three violations, and shows 11 violations as undetermined.
 - Ten undetermined violations are summarized in the observations section of the inspection report and requests for documentation within 30 days for five observations (undetermined violations).
 - A letter from the facility to the CUPA, dated January 12, 2022, indicates 18 corrective actions by the tank facility for several APSA violations.
 - CERS reflects 14 violations for an inspection dated November 12, 2021.
 - An inspection report, dated March 19, 2019, cites 2 violations, and shows one violation as undetermined.
 - The observations section of the inspection report does not include a summary of the undetermined violation.
 - CERS reflects two violations for an inspection dated March 19, 2019.

Note: The examples provided above may not represent all instances of this observation.

RECOMMENDATION:

Ensure information entered in CERS is consistent with the information on APSA tank facility inspection reports and all observed violations and RTC are consistently cited on an inspection report.

8. OBSERVATION:

The CERS reporting requirement is currently set as “APSA Applicable” for 286 tank facilities. The CUPA’s data management system identifies 282 APSA tank facilities.

- 261 APSA tank facilities are identified in both CERS and the CUPA’s data management system.
- 25 APSA tank facilities are reported as “APSA Applicable” in CERS but are not identified as APSA tank facilities in the CUPA’s data management system. Some of these facilities are likely not APSA regulated, and the CUPA should change the CERS APSA reporting requirement to “APSA Not Applicable” for each facility. Some of these facilities are APSA regulated, and the CUPA should update the local data management system accordingly.
- 21 facilities are identified as APSA tank facilities in the CUPA’s data management system but are not in the CERS list of APSA facilities. The CUPA should investigate if the facilities are APSA tank facilities. If the facility is not subject to APSA, the APSA reporting requirement should be set to “Not Applicable,” and the facility should not be identified as an APSA tank facility in the CUPA’s data management system. If the facility is subject to APSA, the APSA reporting requirement should be set to “Applicable.”

RECOMMENDATION:

Complete the reconciliation of the APSA Program information in the CUPA’s data management system with CERS to ensure all APSA tank facilities are included in both systems.

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9. OBSERVATION:

SPCC Plans were submitted to CERS by APSA tank facilities as part of the CERS APSA submittal.

SPCC Plans are not required as part of an APSA submittal; therefore, SPCC Plans should not be uploaded to CERS.

The APSA documentation section in CERS is for providing an annual tank facility statement, unless an HMBP is already provided, or for providing other local reporting requirement documents.

RECOMMENDATION:

Utilize the regulator comments field in CERS to provide feedback and advise APSA tank facilities that SPCC Plans should not be included in future CERS APSA submittals.

10. OBSERVATION:

The area plan contains the following information that may benefit from improvement:

- Page 2: The list of Unified Program elements is missing the fire code Hazardous Materials Management Plan (HMMP) and Hazardous Materials Inventory Statement (HMIS), which is consolidated with the HMBP Program to streamline the regulatory requirements for regulated facilities. Also, remove reference to SPCC.

RECOMMENDATION:

With the next revision of the area plan, address the above observation.

11. OBSERVATION:

Review of permits issued by the CUPA as the "Permit to Operate" indicate the following:

- Permit conditions show "Aboveground Petroleum ACT SPCC Plans" and reference the Code of Federal Regulations (CFR), Title 40.

The Federal SPCC rule is not delegated to any state. Unified Program Agencies implement and enforce APSA.

RECOMMENDATION:

Update the "Permit to Operate" conditions by removing reference to SPCC and CFR Title 40.

12. OBSERVATION:

The Public Participation and Fee Dispute Resolution Procedures are contained within the annual Self-Audit Reports. The Self-Audit Report is a report in which the CUPA should reflect on program implementation over the last fiscal year; administrative procedures should be maintained in a separate document.

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RECOMMENDATION:

In future annual Self-Audit Reports, do not include administrative procedures. Administrative procedures, such as Public Participation and Fee Dispute Resolution Procedures should be procedural documents outside of the Self-Audit Report.

13. OBSERVATION:

The information provided below summarizes a comparison of the total number of regulated facilities within each Unified Program element upon certification of the CUPA with present-day circumstance and the degree to which the number of regulated facilities has increased or decreased. The information is sourced from the following:

- *Original Certification Source: San Mateo County Health Services Agency – Environmental Health Services Division of Environmental Health 1996 CUPA Application*
- *Current CUPA Evaluation Sources: CERS “Summary Regulated Facilities by Unified Program Element Report” & CERS “UST Inspection Summary Report (Report 6)”, both generated on July 5, 2023.*

- Total Number of Regulated Businesses and Facilities:
 - Upon Certification in 1996: 2,618
 - Current CUPA Evaluation: 3,844
 - An addition of 1,226 facilities
- Total Number of Hazardous Materials Release Response Plan and Inventory (Business Plan) Regulated Businesses and Facilities:
 - Upon Certification in 1996: 2,188
 - Current CUPA Evaluation: 2,946
 - An addition of 758 facilities
- Total Number of Regulated Underground Storage Tank (UST) Facilities:
 - Upon Certification in 1996: 573
 - Current CUPA Evaluation: 264
 - A decrease of 309 facilities
- Total Number of Regulated Underground Storage Tanks (USTs):
 - Upon Certification in 1996: 1,302
 - Current CUPA Evaluation: 719
 - A decrease of 583 Underground Storage Tanks
- Total Number of Regulated Hazardous Waste Generator (HWGs) Facilities:
 - Upon Certification in 1996: 1,975
 - Current CUPA Evaluation: 1,820
 - A decrease of 155 facilities
- Total Number of Regulated Household Hazardous Waste (HHW) Facilities:
 - Current CUPA Evaluation: 3
 - HHW facilities were not regulated under the Unified Program upon certification in 1996.

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- Total Number of Regulated Tiered Permitting Facilities (Permit By Rule, Conditionally Authorized, Conditionally Exempt):
 - Upon Certification in 1996: 108
 - Current CUPA Evaluation: 15
 - A decrease of 93 facilities

- Total Number of Regulated Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) Facilities:
 - Current CUPA Evaluation: 74
 - RCRA LQG Facilities were not regulated under the Unified Program upon certification in 1996.

- Total Number of Regulated Risk Management Prevention Plan (RMPP), also known as California Accidental Release Prevention (CalARP) Program Facilities:
 - Upon Certification in 1996: 75
 - Current CUPA Evaluation: 9
 - A decrease of 66 facilities

- Total Number of Regulated Aboveground Petroleum Storage Act (APSA) Tank Facilities:
 - Upon Certification in 1996: 18
 - Current CUPA Evaluation: 286
 - An addition of 268 facilities

Since the CUPA applied for certification in 1996, an expansion of responsibilities in the HMBP and APSA programs has occurred, increasing the total regulated facility count and attributing to an increased workload undertaken by the CUPA to further implement regulatory oversight of each of these programs. Additionally, the management of compliance, monitoring, inspection, and enforcement information transitioned from the use of Unified Program Consolidated Forms (UPCFs) to the implementation of electronic data reporting through local data management systems and CERS.

The information below is a comparison of the overall full time equivalent (FTE) of CUPA personnel allocated to the implementation of the Unified Program upon certification of the CUPA with present-day circumstance and the degree to which allocated inspection and supervisory/management staff has increased or decreased. The information is sourced from the San Mateo County Environmental Health Division 1996 CUPA application, and the training records provided by the CUPA.

CUPA Personnel:

- Inspection and other Staff
 - Upon Certification in 1996:
 - 11 Staff, each at a 100% FTE = 11 Full Time positions
 - Currently:
 - 15 Staff, each at a 100% FTE = 15 Full Time positions

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- Supervisory and Management Staff
 - Upon Certification in 1996:
 - 1 Staff at a 100% FTE = 1 Full Time position
 - Currently:
 - 2 Staff at a 100% FTE = 2 Full Time positions

RECOMMENDATION:

Continue to conduct the annual review and update of the fee accountability program to determine the current necessary and reasonable costs to implement all aspects of the Unified Program.

14. OBSERVATION:

The information below is a summary of the overall implementation of the HWG Program and the CUPA's hazardous waste related activities based on review of policies and procedures, CERS CME information, facility file information, information provided by the CUPA and Self-Audit Reports between January 1, 2020, and December 31, 2022:

- The CUPA has reported 2,183 HWG facilities under its jurisdiction.
- CERS reflects there are 61 Resource Conservation and Recovery Act (RCRA) Large Quantity Generators (LQGs), 18 Tiered Permitted (TP) facilities, and 4 Household Hazardous Waste (HHW) facilities within the jurisdiction of the CUPA.
- The 3-year inspection frequency for all HWG Program facilities is currently being met.
- The CUPA conducted a total of 5,374 HWG inspections, including 3,359 "Routine" and 2,015 "Other" inspection types.
 - 1,418 of 3,359 (42%) "Routine" inspections had no violations cited.
 - 1,941 of 3,359 (58%) "Routine" inspections had at least one violation cited.
 - 5,286 total violations were cited, consisting of:
 - 31 (<1%) Class I violations
 - 918 (27%) Class II violations
 - 4,337 (82%) minor violations
- CERS reflects the CUPA has ensured RTC for 4,438 of 5286 (84%) violations cited.
- CERS reflects no formal enforcement actions for hazardous waste related violations were completed.
- Inspection reports generally document whether consent to inspect was requested prior to beginning the inspection and contain detailed comments that note the factual basis of cited violations.
- Violation observations and corrective action language are consistently included in inspection reports and are being entered in CERS.

RECOMMENDATION:

Continue with the three-year HWG inspection frequency and applied enforcement efforts in addition to generating inspection reports with detailed comments for describing the factual basis for cited violations. Continue to ensure that detailed factual basis of each violation is included in inspection reports and in CERS, to support any enforcement efforts.

Follow up with facilities that have not obtained RTC by the scheduled RTC date and apply enforcement, per the I&E Plan. Ensure CUPA personnel continually complete and maintain

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current HWG training. DTSC may be contacted to provide CUPA personnel with training opportunities.

15. OBSERVATION:

On July 13, 2023, an oversight inspection was conducted as part of the Annual Monitoring System Certification and Spill Containment Testing of a Motor Vehicle Fuel (MVF) facility. The facility had four single-walled tanks; two regular, one premium, and one diesel tank.

The International Code Council (ICC) Certified inspector met with facility staff and the testing company to discuss procedures. The inspector confirmed the functionality of all sensors with corresponding audio and visual alarms. The inspector used a combination of checklists and written notes to ensure all information was captured accurately and all required components were tested. The only inconsistency identified by the inspector was regarding the site plan map, which did not accurately illustrate the siphon piping and line leak detectors. The inspector was knowledgeable of the facility monitoring requirements as a single-walled site and initiated the discussion of the Enhanced Leak Detection (ELD) testing required for facilities within 1,000 feet of a drinking water well. The facility has not previously performed the ELD testing, and the owner/operator was unable to produce a Request for Reconsideration (RFR) letter to abate the requirement. The inspector was aware of the recent change in ownership that further compounded this issue. The inspector clearly explained the leak detection and paperwork violations to the facility staff on site, provided detailed notes with the inspection report, and left contact information for any further questions. Violation and required RTC information have been reported to CERS.

RECOMMENDATION:

Review CERS submittals for accuracy. Ensure single-walled sites within 1,000 feet of a drinking water well, that cannot produce an RFR letter, are completing the initial and subsequent triennial ELD testing. Continue to provide reminders to owners and operators of Single-Walled USTs of the upcoming December 31, 2025, deadline for closure.

16. OBSERVATION:

On July 24th, 2023, CalEPA observed an HMBP inspection conducted by a CUPA inspector. The inspection occurred at CERS ID 10064242. The inspector was well prepared for the inspection and reviewed relevant information prior to arriving at the facility. The inspector established rapport with the facility operators, toured the entire site, verified inventory, site map, and emergency response plan information and training on site, and effectively communicated technical information to the facility operators. The inspector identified and classified all violations.

On July 24th, 2023, CalEPA observed a CalARP inspection conducted by a CUPA inspector. The inspection occurred at CERS ID 10064242. The inspector was well prepared for the inspection; they reviewed information, including the most current RMP, prior to arriving at the facility. The inspector established rapport with the facility operators, requested and reviewed the most current RMP information, toured the entire site, and effectively communicated technical information to the facility operators. CalEPA noted that the Operating Procedures provided by

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the facility did not match the information contained within the Risk Management Plan (RMP) regarding the Operating Procedures.

On July 25th, 2023, CalEPA observed an HMBP inspection conducted by a CUPA inspector. The inspection occurred at CERS ID 10064197. The inspector was well prepared for the inspection and reviewed relevant information prior to arriving at the facility. The inspector established rapport with the facility operators, toured the entire site, verified inventory, site map, and emergency response plan information and training on site, and effectively communicated technical information to the facility operators. The inspector identified and classified all violations.

RECOMMENDATION:

CalEPA recommends the CUPA continues to conduct thorough HMBP and CalARP inspections.

CalEPA recommends the CUPA conduct a thorough review of all prevention program elements at CalARP facilities, including conducting a thorough review of the Operating Procedures.